

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000011849

FILED
Feb 05, 2009
Secretary of State

Entity Name: GULF COAST EXPRESS, LLC

Current Principal Place of Business:

8220 HART DRIVE
NORTH FORT MYERS, FL 33917 US

New Principal Place of Business:

Current Mailing Address:

8220 HART DRIVE
NORTH FORT MYERS, FL 33917 US

New Mailing Address:

FEI Number: 20-0722397

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NICCU, KENNETH E OWNER
8220 HART DRIVE
NORTH FORT MYERS, FL 33917 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NICCU, KENNETH E PRES
Address: 8220 HART DRIVE
City-St-Zip: NORTH FORT MYERS, FL 33917 US

Title: MGRM () Delete
Name: VICKERS, DENISE M SECR
Address: 1612 PINEY RD
City-St-Zip: NORTH FORT MYERS, FL 33903 US

Title: MGRM (X) Delete
Name: NICCU, JEREMY B V. PRES
Address: 8220 HART DRIVE
City-St-Zip: NORTH FORT MYERS, FL 33917

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: NICCU, JEREMY B V. PRES
Address: 8220 HART DRIVE
City-St-Zip: NORTH FORT MYERS, FL 33917 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KENNETH E NICCU

PRES

02/05/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date